

Please type a plus sign (+) inside this box →



PTO/SB/05 (12/97)
OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | | |
|---|--|------------|-------------|---|
| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new non-provisional applications under 37 CFR 1.53(b)) | Attorney Docket No. | MS-02/3/US | Total Pages | 26 |
| | First Named Inventor or Application Identifier | | | Forbes, E. I. Express Mail Label No. ET515876870US |
| | | | | |

U.S. PTO
633172
08/04/03

| | | |
|---|--|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450 |
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 26] (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D Invention - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 5]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) <i>[Note Box 5 below]</i> </p> <p><input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> | | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies </p> |
| Accompanying Application Parts <ul style="list-style-type: none"> 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 14. <input checked="" type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other | | |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No: 09/841,377

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or New correspondence address below

| | | | | | |
|---------|--------------------------|-----------|--------------|----------|-------|
| NAME | James C. Forbes | | | | |
| ADDRESS | 1625 Glenview Road, #206 | | | | |
| CITY | Glenview | STATE | IL | ZIP CODE | 60025 |
| COUNTRY | U.S.A. | TELEPHONE | 847-998-0324 | FAX | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.

15750 U.S. PTO
08/04/03PTO/SB/17 (10/96)
OMB 0651-0032Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.**FEE TRANSMITTAL**

| | | Complete if Known | | | |
|-------------------------|--|----------------------|------------------------|--|--|
| | | Application Number | To be assigned | | |
| | | Filing Date | August 4, 2003 | | |
| | | First Named Inventor | Forbes, E. I. | | |
| | | Group Art Unit | 3712 | | |
| | | Examiner Name | To be assigned | | |
| TOTAL AMOUNT OF PAYMENT | | (\$) | \$375 | | |
| | | | Attorney Docket Number | | |
| | | | MS-02/3/US | | |

| METHOD OF PAYMENT (check one) | | | | | | FEE CALCULATION (continued) | | | | | |
|---|----------|----------|--|---|----------|------------------------------------|-----------------|----------------|-----------------|--|----------|
| 1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: | | | | | | 3. ADDITIONAL FEES | | | | | |
| Deposit Account Number | | | | | | Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
| Deposit Account Name | | | | | | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | — |
| <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | | | <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b) | | | 127 | 50 | 227 | 25 | Surcharge - late provisional filing or cover sheet. | — |
| 2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | | | | 139 | 130 | 139 | 130 | Non-English specification | — |
| FEE CALCULATION | | | | | | 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | — |
| 1. FILING FEE | | | | | | 112 | 920 | 112 | 920 | Requesting publication of SIR prior to Examiner action | — |
| Large Entity Small Entity | | | | | | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | — |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid | 115 | 110 | 215 | 55 | Extension for response within first month | — |
| 101 | 750 | 201 | 375 | Utility filing fee | 375 | 116 | 410 | 216 | 205 | Extension for response within second month | — |
| 106 | 330 | 206 | 165 | Design filing fee | | 117 | 930 | 217 | 465 | Extension for response within third month | — |
| 107 | 540 | 207 | 270 | Plant filing fee | | 118 | 1,550 | 218 | 725 | Extension for response within fourth month | — |
| 108 | 750 | 208 | 375 | Reissue filing fee | | 119 | 310 | 219 | 155 | Notice of Appeal | — |
| 114 | 160 | 214 | 80 | Provisional filing fee | | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | — |
| SUBTOTAL (1) (\$) | | | | | | 121 | 270 | 221 | 135 | Request for oral hearing | — |
| (\$) | | | | | | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | — |
| 2. CLAIMS | | | | | | 140 | 110 | 240 | 55 | Petition to revive unavoidably abandoned application | — |
| Large Entity Small Entity | | | | | | 141 | 1,320 | 241 | 660 | Petition to revive unintentionally abandoned application | — |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid | 142 | 1,320 | 242 | 660 | Utility issue fee (or reissue) | — |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | | 143 | 450 | 243 | 225 | Design issue fee | — |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | | 144 | 670 | 244 | 335 | Plant issue fee | — |
| 104 | 280 | 204 | 140 | Multiple dependent claim | | 122 | 130 | 122 | 130 | Petitions to the Commissioner | — |
| 109 | 84 | 209 | 42 | Reissue independent claims over original patent | | 123 | 50 | 123 | 50 | Petitions related to provisional applications | — |
| 110 | 18 | 210 | 9 | Reissue claims in excess of 20 and over original patent | | 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | — |
| SUBTOTAL (2) (\$) | | | | | | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | — |
| | | | | | | 146 | 790 | 246 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) | — |
| | | | | | | 149 | 790 | 249 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) | — |
| | | | | | | Other fee (specify) | — | | | Other fee (specify) | — |
| | | | | | | Other fee (specify) | — | | | SUBTOTAL (3) (\$) | |
| | | | | | | * Reduced by Basic Filing Fee Paid | | | | | |

| SUBMITTED BY | | Complete (if applicable) | | | |
|-----------------------|-----------------|--------------------------|-------------|-----------------------|--|
| Typed or Printed Name | James C. Forbes | Reg. Number | 39,457 | | |
| Signature | James C. Forbes | Date | Aug 4, 2003 | Deposit Acct. User ID | |